

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10553861

FILING DATE

27 SEP 2006

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/		/			
2	/		/			
3		2		/		
4		2		/		
5	/		/			
6		1		/		
7		2		/		
8		0		/		
9		0		/		
10		0		/		
11		0		/		
12		0		/		
13		0		/		
14		0		/		
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49						
50						
TOTAL IND.	3		3			
TOTAL DEP.	17		15			
TOTAL CLAIMS	20		18			

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL IND.						
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TOTAL CLAIMS						